

## ADVANCE Praise

Sometimes an artfully crafted quasi-acronym can help distinguish one otherwise indistinguishable clinical advance from another (1–3). The infectiousness of this engaging wOrdPlay is evidenced by a recent report describing the role of Tirofiban for prevention of ischHEmIc complicationNS among high-risk pAtieNts undergoIng coronary angioplasTY (4)—a distinguished advance indeed!

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## REFERENCES

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## REPLY

We thank Dr. Diamond for his interest in our recent paper (1).

It can happen that, when a trial is designed, not enough attention is paid to the (quasi)-acronym used to identify the study. Unfortunately, it also happens that the medical world finishes paying more attention to it than to the trial message itself, and that is not a distinguished advance indeed! But the lesson is clear: from now on, we will keep ADVANC(E)ing with new STRATEG(Y)ies (2).

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## CORRECTION

**Chessa M, Butera G, Carminati M. Letter to the Editor: Risk of Thrombus Formation on Devices Used to Close Transcatheter Atrial Septal Defect and Patent Foramen Ovale. J Am Coll Cardiol 2004;44:1712.**

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